



## CONTINUUM OF CARE REFORM

### CCR builds on California's other efforts

#### **Approved Relative Caregivers Program (ARC)**

Participating counties support relative caregivers with a payment equal to the basic foster care rate.

#### **Child and Family Teaming**

An effective approach to coordinated care and case planning for all children and youth in the child welfare system.

#### **Pathways to Mental Health**

Originating from the Katie A. lawsuit settlement, Pathways is intended to improve the coordination between child welfare and mental health systems so that children in foster care receive timely, and effective individualized mental health services.

#### **Quality Parenting Initiative**

Will create new strategies and practices within child welfare for the recruitment and retention of quality caregivers, and support biological parents with reunification efforts.

#### **Residentially-Based Services Reform (RBS)**

A demonstration project begun in 2008 that tested a short-term residential program model with ongoing community-based services and support, and which serves as the foundation for STRTC.

#### **Resource Family Approval (RFA) Program**

A pilot program that provides upfront training and assessment of families seeking to parent children in foster care will expand statewide.

## INTEGRATING MENTAL HEALTH SERVICES

The availability of a broad array of mental health services is essential to the proper support of children and youth placed in foster care as a result of abuse or neglect. The trauma experienced by these children can have long-term negative impacts to a child's developmental, social, emotional, and physical health. Services critical to managing the impacts of trauma include a continuum of mental health services. In California, "non-specialty" mental health services may be provided by a county's Managed Care Plan and "specialty" mental health services mandated under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program are provided, or arranged to be provided, through the county Mental Health Plan

The EPSDT Program is a comprehensive benefit package within Medicaid specifically for children up to age 21, and includes medical, dental, and mental health care services. All children involved with the foster care system are eligible for federal Medicaid benefits, called Medi-Cal in California. The EPSDT Program emphasizes prevention and early intervention, and requires that children receive comprehensive examinations to identify and address treatment needs.

California's Settlement Agreement in the *Katie A. v Bonta* lawsuit has led the state to take a series of actions intended to transform the way child welfare and mental health agencies provide entitlement specialty mental health services to children, youth, and families in the child welfare system. The Pathways to Mental Health Services is a result of the Katie A. Settlement Agreement and calls for the provision of a comprehensive array of services that are delivered in a coordinated manner, based in home or community settings, and tailored to meet the needs of individual children and families.

The Continuum of Care Reform (CCR) builds on these efforts and further ensures that children and youth in foster care receive services that meet their mental health needs regardless of the placement setting. Assembly Bill 403 (Stone; statutes of 2016), the legislation implementing CCR, recognizes that achieving this goal requires a high degree of collaboration and coordination between child welfare agencies and county mental health plans. Success also requires expanded availability of mental health services delivered in home and community-based settings. Some key efforts are:

- A universal assessment process will identify the needed service and supports, and facilitate the development of plans to meet the needs of the child, youth, and families, including needs for mental health services.
- A Child and Family Team will be convened by child welfare and probation agencies for all children and youth in foster care to develop needs and service plans, with participation from children, youth,



families, caregivers, and professionals, including county mental health partners and clinicians.

- Facilities seeking licensure as a Short-term Residential Therapeutic Centers (STRTCs) must demonstrate the capacity to meet the treatment needs of children in order to transition them quickly to a home based family placement.
- Foster Family Agencies (FFAs) and STRTCs must have the capacity to deliver an array of “core services,” including in-home mental health services for family care placements to ensure children receive services they need regardless of their placement setting.
- STRTCs and FFA must be certified by the county mental health plan or have a relationship with a certified provider to directly deliver or arrange for the EPSDT specialty mental health services that children and youth need, as authorized by the county Mental Health Plan.
- A new rate structure is being developed for STRTC and FFA programs to reflect these changes.
  - Development of a standardized assessment process to promote better coordination of child welfare and mental health services.
  - Requirement for STRTCs and FFAs to obtain and maintain formal accreditation from approved national accrediting bodies as a condition of licensure.
  - Development of a coordinated monitoring and oversight system between the California Department of Social Services and the Department of Health Care Services in coordination with interested stakeholders such as youth, families, providers, and other advocates.

#### **STATUTORY TIMELINES**

- The current licensure and rate structures for group homes and FFAs will sunset January 1, 2017, unless an extension is granted.
- The California Department of Social Services will establish new licensure and rate systems for STRTCs and FFAs beginning on January 1, 2017.
- For the next two years, group homes at a county placing agency’s request can receive an extension to operate for an additional two years. Statute provides for extensions at the request of county probation agencies.
- The accreditation of STRTCs and FFAs begins in 2016, and is expected to take two to three years.

#### **FOR MORE INFORMATION OR QUESTIONS**

- [CCR: A Report to the Legislature](#)
- [Assembly Bill 403 \(Chapter 773, Statutes of 2015\)](#)
- For additional information or questions, please contact: [CCR@dss.ca.gov](mailto:CCR@dss.ca.gov).